

I. Research Fellow Profile

This form has been designed to assist you in assessing your personal research development needs and goals. Please share it with your program facilitator during your initial meeting.

Name: _____

Academic Rank: _____ Instructor: _____

Assistant Professor: _____ Associate Professor: _____

Year(s) of Teaching Experience: _____

Program & Location: _____

Start Date at CU: _____

Degrees Held: _____

Email Address: _____

Phone Number: _____

City, State: _____ Time zone: _____

II. Research Fellow Self-Assessment**1. Assess your strengths and needs/challenges in the following area:****a. Teaching:****b. Scholarship****i. Research or evidence-based project experience**

ii. Poster Presentations

iii. Podium Presentations

iv. Publications

2. Identify your research goals.

Signature

Date